House File 2193

AN ACT

RELATING TO EMERGENCY MEDICAL CARE PROVIDERS, EMERGENCY MEDICAL CARE SERVICE PROGRAMS AND EMERGENCY MEDICAL CARE SERVICES TRAINING PROGRAMS, AND PROVIDING PENALTIES.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. Section 85.36, subsection 9, paragraph a, Code 2009, is amended to read as follows:

a. In computing the compensation to be allowed a volunteer fire fighter, emergency medical care provider, reserve peace officer, volunteer ambulance driver, volunteer emergency rescue technician as defined in section 147A.1, or emergency medical technician trainee, the earnings as a fire fighter, emergency medical care provider, reserve peace officer, or volunteer ambulance driver, volunteer emergency rescue technician, or emergency medical technician trainee shall be disregarded and the volunteer fire fighter, emergency medical care provider, reserve peace officer, or volunteer ambulance driver, volunteer emergency rescue technician, or emergency medical technician trainee shall be paid an amount equal to the compensation the volunteer fire fighter, emergency medical care provider, reserve peace officer, or volunteer ambulance driver,

volunteer emergency rescue technician, or emergency medical technician trainee would be paid if injured in the normal course of the volunteer fire fighter's, emergency medical care provider's, reserve peace officer's, or volunteer ambulance driver's, volunteer emergency rescue technician's, or emergency medical technician trainee's regular employment or an amount equal to one hundred and forty percent of the statewide average weekly wage, whichever is greater.

- Sec. 2. Section 85.61, subsection 2, paragraph a, Code 2009, is amended to read as follows:
- a. A person, firm, association, or corporation, state, county, municipal corporation, school corporation, area education agency, township as an employer of volunteer fire fighters, volunteer emergency rescue technicians, and emergency medical care providers only, benefited fire district, and the legal representatives of a deceased employer.
- Sec. 3. Section 85.61, subsection 7, paragraph b, Code 2009, is amended to read as follows:
- b. Personal injuries sustained by volunteer emergency rescue technicians or emergency medical care providers as defined in section 147A.1 arise in the course of employment if the injuries are sustained at any time from the time the volunteer emergency rescue technicians or emergency medical care providers are summoned to duty until the time those duties have been fully discharged.
- Sec. 4. Section 85.61, subsection 11, paragraph a, subparagraph (2), Code 2009, is amended to read as follows:
- An emergency medical care provider as defined in section 147A.1, a volunteer emergency rescue technician as defined in section 147A.1, or a volunteer ambulance driver, or an emergency medical technician trainee, only if an agreement is reached between such worker or employee and the employer for whom the volunteer services are provided that workers' compensation coverage under this chapter and chapters 85A and 85B is to be provided by the employer. An emergency medical care provider or volunteer emergency rescue technician who is a worker or employee under this subparagraph is not a casual employee. "Volunteer ambulance driver" means a person performing services as a volunteer ambulance driver at the request of the person in charge of a fire department or ambulance service of a municipality. "Emergency medical technician trainee" means a person enrolled in and training for emergency medical technician certification.

- Sec. 5. Section 100B.31, subsection 3, paragraph b, Code Supplement 2009, is amended to read as follows:
- b. A person performing the functions of an emergency medical care provider or emergency rescue technician as defined in <u>section 147A.1</u> who was not paid full-time by the entity for which such services were being performed at the time the incident giving rise to the death occurred.
- Sec. 6. Section 147A.1, subsection 4, Code Supplement 2009, is amended to read as follows:
- 4. "Emergency medical care provider" means an individual trained to provide emergency and nonemergency medical care at the first-responder, EMT-basic, EMT-intermediate, EMT-paramedic level, emergency medical responder, emergency medical technician, advanced emergency medical technician, paramedic, or other certification levels adopted by rule by the department, who has been issued a certificate by the department.
- Sec. 7. Section 147A.1, subsections 6, 8, and 9, Code Supplement 2009, are amended by striking the subsections.
- Sec. 8. Section 147A.1, Code Supplement 2009, is amended by adding the following new subsections:
- NEW SUBSECTION. 11. "Service program" or "service" means any medical care ambulance service or nontransport service that has received authorization from the department under section 147A.5.
- NEW SUBSECTION. 12. "Training program" means an Iowa college approved by the north central association of colleges and schools or an Iowa hospital authorized by the department to conduct emergency medical care services training.
- Sec. 9. Section 147A.2, Code 2009, is amended to read as follows:

147A.2 Council established — terms of office.

1. An EMS advisory council shall be appointed by the director. Membership of the council shall be comprised of individuals nominated from, but not limited to, the following state or national organizations: Iowa osteopathic medical association, Iowa medical society, American college of emergency physicians, Iowa physician assistant society, Iowa academy of family physicians, university of Iowa hospitals and clinics, American academy of emergency medicine, American academy of pediatrics, Iowa EMS association, Iowa firemen's association, Iowa professional firefighters, EMS education programs committee, EMS regional council, Iowa nurses

association, Iowa hospital association, and the Iowa state association of counties. The council shall also include at least two at-large members who are volunteer emergency medical care providers and a representative of a private service program.

- 2. The EMS advisory council shall advise the director and develop policy recommendations concerning the regulation, administration, and coordination of emergency medical services in the state.
- Sec. 10. Section 147A.4, Code Supplement 2009, is amended to read as follows:

147A.4 Rulemaking authority.

- 1. a. The department shall adopt rules required or authorized by this subchapter pertaining to the operation of ambulance, rescue, and first response services service programs which have received authorization under section 147A.5 to utilize the services of certified emergency medical care providers. These rules shall include but need not be limited to requirements concerning physician supervision, necessary equipment and staffing, and reporting by ambulance, rescue, and first response services service programs which have received the authorization pursuant to section 147A.5.
- b. The director, pursuant to rule, may grant exceptions and variances from the requirements of rules adopted under this subchapter for any ambulance, rescue, or first response service program. Exceptions or variations shall be reasonably related to undue hardships which existing services experience in complying with this subchapter or the rules adopted pursuant to this subchapter. However, no exception or variance may be granted unless the service adopted a plan approved by the department prior to July 1, 1996, to achieve compliance during a period not to exceed seven years with this subchapter and rules adopted pursuant to this subchapter. Services requesting exceptions and variances shall be subject to other applicable rules adopted pursuant to this subchapter.
- 2. The department shall adopt rules required or authorized by this subchapter pertaining to the examination and certification of emergency medical care providers. These rules shall include, but need not be limited to, requirements concerning prerequisites, training, and experience for emergency medical care providers and procedures for determining when individuals have met these requirements. The department shall adopt rules to recognize the previous EMS training

and experience of first responders and emergency medical technicians to provide for an equitable transition to the EMT-basic certification emergency medical care providers transitioning to the emergency medical responder, emergency medical technician, advanced emergency medical technician, and paramedic levels. The department may require additional training and examinations as necessary and appropriate to ensure that individuals seeking certification transition to another level have met the EMT-basic knowledge and skill requirements. All requirements for transition to another level, including fees, shall be adopted by rule.

- 3. The department shall establish the fee for the examination of the emergency medical care providers to cover the administrative costs of the examination program.
- 4. The department shall adopt rules required or authorized by this subchapter pertaining to the operation of training programs. These rules shall include but need not be limited to requirements concerning curricula, resources, facilities, and staff.
- Sec. 11. Section 147A.5, subsections 1 and 3, Code 2009, are amended to read as follows:
- 1. An ambulance, rescue, or first response A service program in this state that desires to provide emergency medical care in the out-of-hospital setting shall apply to the department for authorization to establish a program for delivery of the care at the scene of an emergency, during transportation to a hospital, during transfer from one medical care facility to another or to a private residence, or while in the hospital emergency department, and until care is directly assumed by a physician or by authorized hospital personnel.
- 3. The department may deny an application for authorization, or may place on probation, suspend, or revoke the authorization of, or otherwise discipline a service program with an existing authorization if the department finds reason to believe that the service program has not been or will not be operated in compliance with this subchapter and the rules adopted pursuant to this subchapter, or that there is insufficient assurance of adequate protection for the public. The authorization denial or period of probation, suspension, or revocation, or other disciplinary action shall be effected and may be appealed as provided by section 17A.12.
- Sec. 12. Section 147A.8, Code Supplement 2009, is amended to read as follows:

147A.8 Authority of certified emergency medical care provider.

- 1. An emergency medical care provider properly certified under this subchapter may:
- a. 1. Render emergency and nonemergency medical care, rescue, and lifesaving services in those areas for which the emergency medical care provider is certified, as defined and approved in accordance with the rules of the department, at the scene of an emergency, during transportation to a hospital or while in the hospital emergency department, and until care is directly assumed by a physician or by authorized hospital personnel.
- b. 2. Function in any hospital or any other entity in which health care is ordinarily provided only when under the direct supervision, as defined by rules adopted pursuant to chapter 17A, of a physician, when the emergency care provider is any of the following:
- (1) <u>a.</u> Enrolled as a student or participating as a preceptor in a training program approved by the department; or or an agency authorized in another state to provide initial EMS education and approved by the department.
- $\frac{(2)}{b}$ Fulfilling continuing education requirements as defined by rule; or.
- (3) c. Employed by or assigned to a hospital or other entity in which health care is ordinarily provided only when under the direct supervision of a physician, as a member of an authorized ambulance, rescue, or first response service program, or in an individual capacity, by rendering lifesaving services in the facility in which employed or assigned pursuant to the emergency medical care provider's certification and under the direct supervision of a physician, physician assistant, or registered nurse. An emergency medical care provider shall not routinely function without the direct supervision of a physician, physician assistant, or registered nurse. However, when the physician, physician assistant, or registered nurse cannot directly assume emergency care of the patient, the emergency medical care provider may perform without direct supervision emergency medical care procedures for which that individual is certified if the life of the patient is in immediate danger and such care is required to preserve the patient's life; or.
- (4) <u>d.</u> Employed by or assigned to a hospital or other entity in which health care is ordinarily provided only when

under the direct supervision of a physician, as a member of an authorized ambulance, rescue, or first response service program, or in an individual capacity, to perform nonlifesaving procedures for which those individuals have been certified and are designated in a written job description. Such procedures may be performed after the patient is observed by and when the emergency medical care provider is under the supervision of the physician, physician assistant, or registered nurse, including when the registered nurse is not acting in the capacity of a physician designee, and where the procedure may be immediately abandoned without risk to the patient.

- 2. Nothing in this subchapter shall be construed to require any voluntary ambulance, rescue, or first response service to provide a level of care beyond minimum basic care standards.
- Sec. 13. Section 147A.11, Code 2009, is amended to read as follows:

147A.11 Prohibited acts.

- 1. Any person not certified as required by this subchapter who claims to be an emergency medical care provider, or who uses any other term to indicate or imply that the person is an emergency medical care provider, or who acts as an emergency medical care provider without having obtained the appropriate certificate under this subchapter, is guilty of a class "D" felony.
- 2. An owner of an unauthorized ambulance, rescue, or first response service program in this state who operates or purports to operate an ambulance, rescue, or first response a service program, or who uses any term to indicate or imply authorization without having obtained the appropriate authorization under this subchapter, is guilty of a class "D" felony.
- 3. Any person who imparts or conveys, or causes to be imparted or conveyed, or attempts to impart or convey false information concerning the need for assistance of an ambulance, rescue, or first response a service program or of any personnel or equipment thereof, knowing such information to be false, is guilty of a serious misdemeanor.
- Sec. 14. Section 147A.12, subsection 1, Code 2009, is amended to read as follows:
- 1. This subchapter does not restrict a registered nurse, licensed pursuant to chapter 152, from staffing an authorized ambulance, rescue, or first response service program provided the registered nurse can document equivalency through education

and additional skills training essential in the delivery of out-of-hospital emergency care. The equivalency shall be accepted when:

- a. Documentation has been reviewed and approved at the local level by the medical director of the ambulance, rescue, or first response service program in accordance with the rules of the board of nursing developed jointly with the department.
- b. Authorization has been granted to that ambulance, rescue, or first response service program by the department.
- Sec. 15. Section 147A.13, Code 2009, is amended to read as follows:

147A.13 Physician assistant exception.

This subchapter does not restrict a physician assistant, licensed pursuant to chapter 148C, from staffing an authorized ambulance, rescue, or first response service program if the physician assistant can document equivalency through education and additional skills training essential in the delivery of out-of-hospital emergency care. The equivalency shall be accepted when:

- 1. Documentation has been reviewed and approved at the local level by the medical director of the ambulance, rescue, or first response service program in accordance with the rules of the board of physician assistants developed after consultation with the department.
- 2. Authorization has been granted to that ambulance, rescue, or first response service program by the department.
- Sec. 16. <u>NEW SECTION</u>. 147A.17 Applications for emergency medical care services training programs approval or denial disciplinary actions.
- 1. An Iowa college approved by the north central association of colleges and schools or an Iowa hospital in this state that desires to provide emergency medical care services training leading to certification as an emergency medical care provider shall apply to the department for authorization to establish a training program.
- 2. The department shall approve an application submitted in accordance with subsection 1 when the department is satisfied that the program proposed by the application will be operated in compliance with this subchapter and the rules adopted pursuant to this subchapter.
- 3. The department may deny an application for authorization, or may place on probation, suspend or revoke the authorization of, or otherwise discipline a training program

with an existing authorization if the department finds reason to believe the program has not been or will not be operated in compliance with this subchapter and the rules adopted pursuant to this subchapter, or that there is insufficient assurance of adequate protection for the public. The authorization denial, period of probation, suspension, or revocation, or other disciplinary action shall be effected and may be appealed as provided by section 17A.12.

- Sec. 17. Section 321.267A, subsection 5, Code 2009, is amended to read as follows:
- 5. For the purposes of this section, "other emergency responder" means a fire fighter certified as a fire fighter I pursuant to rules adopted under chapter 100B and trained in emergency driving or an emergency medical responder care provider certified under chapter 147A and trained in emergency driving.
- Sec. 18. Section 724.6, subsection 2, Code Supplement 2009, is amended to read as follows:
- 2. Notwithstanding <u>subsection 1</u>, fire fighters, as defined in <u>section 411.1</u>, <u>subsection 10</u>, airport fire fighters included under <u>section 97B.49B</u>, <u>emergency rescue technicians</u>, and emergency medical care providers, as defined in <u>section 147A.1</u>, shall not, as a condition of employment, be required to obtain a permit under <u>this section</u>. However, the provisions of <u>this subsection</u> shall not apply to a person designated as an arson investigator by the chief fire officer of a political subdivision.

PATRICK J. MURPHY
Speaker of the House

JOHN P. KIBBIE
President of the Senate

I hereby certify that this bill originated in the House and is known as House File 2193, Eighty-third General Assembly.

	MARK BRANDSGARD
	Chief Clerk of the House
Approved	, 2010
CHESTER J. CULVER	
Governor	